										Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003											10/760443			
'CLAIMS AS FILED - PART I (Column 1) (Column 2).										SMALL TYPE	ENTITY	OF	OTHER SMALL	
TOTAL CLAIMS					186		·			RATE	FEE	7	RATE	FEE .
FOR					NUMBER FILED		MUMBER EXTRA			BASIC F	EE 385.0	OR	Basic Fee	770.00
TOTAL CHARGEABLE CLAIMS					/86minus 20=		. 166.			XS 9:	,	OR	X\$18=	2988
INDEPENDENT CLAIMS					9 minus 3 =		6			X43-		OR	X86*	516
MU	LTIPLE	DEPEN	NDENT	CLAIM P	RESENT					+145		OR	+290=	-
* If the difference in column 1 is less than zero, enter "O" in column 2										TOTA		OR	TOTAL	4274
	10/0	100	LAIN	IS AS A	MENDE					OTHER	THAN			
0)	(Column 1) (Column 2) (Column 3)									SMAL	L ENTITY	OR	SMALL	ENTITY
MTA	•	•	REA	LAIMS MAINING FTER NOMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total			34	Minus	- 18	10	.0		X5 9=		ОЯ	X\$18=	
MEN	Indepe	ndent	•	1	Minus	(7	.0		X43=		OR	X86=	
₹	FIRST	PRESE	NTATH	ON OF MI	JLTIPLE DE	PENDENT	CLAIM		•		-	┨ʹʹʹ		
417, 35,55, 77,113,133,158,172,										+145=		OR	+290=	
•	· · · ·									TOT/ ADDIT. FE		OR	TOYAL ADDIT, FEE	
(Column 1) (Calumn 2) (Column 3)												_:		
AMENDMENT B	1/2	10	REN	Laims Maining FTER NDMENT		PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI TIONAL FEE
	Total	· ·		34	Minus	- /8	4	-4	П	XS 9=		OR	X\$18-	
	tnoeper		·	7	Minus	••• (1	0		X43=		OR	X85=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+145=		OR	290=	
1	laston										E	OR	TOTAL ADOIT, FEE	
51	102	יטן	_(Cal	umn 1) _		(Colum	ın 2)	(Column 3)						~]
AMENDMENT C	Κ.		REM	AIMS AINING FTER IDMENT		HIGHL NUMB PREVIO PAID F	ER UBLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATĘ	ADDI- TIONAL REE
	Total		. 4	34	Minus	-18	1	- 6		X\$ 9=		OR	X\$18=	
	Independent				Minus			.0		X43=	1	OR	X86=	
	FIRST F	RESE	NTATIC	ON OF MIL	LTIPLE DEF	ENDENT	CLAIM	E	1			1 ~~		
. 14		\bigcirc	-(1/	SMO	ply in con	l	+145=		OR	+290=				
- 1	the High	est Nut	nber Pre	eviously Pa	id for IN THE	S SPACE &	less that	20, enter "20."		TOTAL LODIT. FEI		OR ,	YOTAL ADDIT, FEE	0
					id For' (N TH) For' (Total o			i 3. enzer 3. highest numbe	tou	nd in the a	ppropriate b	n in cot	UMM 1.	

FORM PTO-875 (Rev 1003) -